

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 704653 (5)
1. Corporation Name
THE EPISCOPAL CHURCH OF ST JOHN THE BAPTIST, INC



Principal Place of Business: 1000 BETHUNE DRIVE ORLANDO FL 32805-3404
Mailing Address: 1000 BETHUNE DRIVE ORLANDO FL 32805-3404

3. Date Incorporated or Qualified: 01/11/1972
3a. Date of Last Report: 02/27/1995

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

4. FEI Number: 70-4653581 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**PINDER, NELSON W
2632 MARQUISE COURT
ORLANDO FL 32805**

10. Name and Address of New Registered Agent
81 Name: Ernest A. Boyd
82 Street Address (P.O. Box Number is Not Acceptable): 2242 Pipestone Ct.
83 Orlando, FL
84 City: Orlando, FL
85 Zip Code: 32818

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Ernest A. Boyd Ernest A. Boyd 1/26/96
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS

TITLE	SWD	<input type="checkbox"/> DELETE
NAME	BOYD, ERNEST	
STREET ADDRESS	2242 PIPESTONE COURT	
CITY-ST-ZIP	ORLANDO FL 32818	
TITLE	JWD	<input type="checkbox"/> DELETE
NAME	BURGESS, GRACE	
STREET ADDRESS	2130 STRYKER ST	
CITY-ST-ZIP	ORLANDO FL 32805	
TITLE	S	<input type="checkbox"/> DELETE
NAME	HARRIS, LORRAINE	
STREET ADDRESS	2701 WINDWARD	
CITY-ST-ZIP	ORLANDO FL 32805	
TITLE	T	<input type="checkbox"/> DELETE
NAME	CLARK, MERCERDESE R	
STREET ADDRESS	730 WOODS AVE.	
CITY-ST-ZIP	ORLANDO FL 32805	
TITLE	RD	<input checked="" type="checkbox"/> DELETE
NAME	PINDER, NELSON W.	
STREET ADDRESS	2632 MARQUISE CT.	
CITY-ST-ZIP	ORLANDO FL 32805	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	500001753095
4.4 CITY-ST-ZIP	-03/22/96--01011--011
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	***61.25
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ernest A. Boyd Senior Warden 1/26/96 407/521-4270
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER Warden Date Daytime Phone #

CR2E037 (12/95)

Handwritten signature and date: 3-21-96